

Patent Attorney's Docket No. <u>018413-378</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	BOX AF				
Charlie RICCI et al.	Group Art Unit: 1617				
Application No.: 09/954,789) Examiner: Shanham J. Sharareh				
Filed: September 12, 2001	Confirmation No.: 8809				
For: METHODS FOR TREATING	RECEIVED				
ENDOLEAKS DURING) 9°7				
ENDOVASCULAR REPAIR OF	JAN 2⁻⁷ 2003				
ABDOMINAL AORTIC) 				
ANEURYSMS	TECH CENTER 1600/2900				
REQUEST FOR RECONSIDERAT	ION TRANSMITTAL LETTER				
Box AF Assistant Commissioner for Patents Washington, D.C. 20231 Sir:					
Enclosed is a Request for Reconsideration for the	ne above-identified patent application.				
[] A Petition for Extension of Time is also e	enclosed.				
[] A Terminal Disclaimer and a check for [] \$55.00 (248) [] \$110.00 (148) to cover the requisite Government fee are also enclosed.					
[X] Also enclosed is <u>a Second Information D</u> PTO-1449 and the Declaration of Richard J. Gr					
[X] Small entity status is hereby claimed.					
[] Applicant(s) request continued examination [] \$370.00 (279) [] \$740.00 (179) fee due	on under 37 C.F.R. § 1.114 and enclose the under 37 C.F.R. § 1.17(e).				
 -[] Applicant(s) previously submitted requested. 	, on, for which continued examination is				
[] -Applicant(s) request suspension of action exceed three months from the filing of thi § 1.103(c). The required fee under 37 C.	s RCE, in accordance with 37 C.F.R.				
[] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) . (146/246) is also enclosed.					

[X] No additional claim fee is require	[X]	X	No additional	ai ciaim	tee	1S	required	1.
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[]	An additional	claim fee is	required,	and is	calculated	as shown	below:
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AMENDED CLAIMS						
	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE	
Total Claims		MINUS 4 =		× \$18.00 (103) =		
Independent Claims		MINUS 2 =		× \$84.00 (102) =		
If Amendment adds mu						
Total Amendment Fee						
If small entity status is claimed, subtract 50% of Total Amendment Fee						
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					** **	

[] A claim fee in the	ne amount of \$	is enclosed.
[] Charge \$	to Deposit Account	t No. 02-4800.
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The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

sy: Frin M

erin M. Dunston

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Date: January 22, 2003